Acromegaly.—HANSERMANN (*Berliner klinische Wochenschrift*, 1897, No. 20) reports a case that came to autopsy with a diagnosis of diabetes and furunculosis. The post-mortem examination showed characteristic changes in the hands and face. Occupying the position of the hypophysis there was a tumor 3 x 2.5 x 2 cms., a sarcomatous struma of the hypophysis. The thyroid was slightly enlarged, with larger and smaller colloid cysts. No thymus present. The pancreas was 20 x 4.5 x 1.5 cms., weighing 47 grammes, not strikingly atrophic, but microscopically there was a marked increase of the connective tissue. This case is interesting on account of the combination of the tumor, the struma, and the diabetes. The author found ninety-seven reported cases of acromegaly. Autopsy was performed in fifteen, and of them twelve showed changes in the hypophysis cerebri. The other three were either not typical or were not carefully examined. We may infer that there is a connection between the changes in the pituitary body and acromegalia. The author's own view is that all organs have a double function: a negative, withdrawing something from the organism, and a positive, introducing something into the organism. Again, that the progressive development of one organ has progressive development of other organs as a consequence. This latter process he calls, in distinction to compensatory hyperplasia, altruistic hyperplasia. The pancreas offers an example of the first part of the theory. It eliminates the pancreatic juice, and by its positive activity prevents diabetes. The sexual organs, in the connection of their development with that of other organs as the larynx, offer a good illustration of altruistic hyperplasia. If a causal relation exists between tumors of the hypophysis and acromegaly, the author thinks it can best be explained as an altruistic hyperplasia. Hansermann decries the indiscriminate use of organ-extracts. Theoretically, they should be of use in cases of altruistic atrophy, as myxœdema, and possibly in some cases of diabetes and Addison's disease. He thinks organ-therapy is out of place in Graves's disease and in acromegaly. The author thinks there was no connection between the struma and the acromegaly. On the other hand, partly because of the fact that there is often an increase of the connective tissue in both dieases, he thinks it not unlikely that there was a close connection between the diabetes and the acromegaly.

Neusser's Granules and the Excretion of the Alloxur-bodies in the Urine.—In 1894 NEUSSER described a special granulation of the leucocytes in cases of so-called uratic diathesis. Under the term uratic diathesis he included a variety of conditions like gout, uratic lithiasis, and various types of so-called "irregular gout," including muscular rheumatism, nervous asthma, certain skin affections, and gastro-intestinal disturbances, leukæmia, neuralgia, and neurasthenia. For demonstrating the granules he treated the dried blood-slide with a modification of Ehrlich's tri-acid mixture by means of which the granules were stained of an intense greenish-black color. The individual granules varied considerably in size and were situated always over and around the nuclei of the leucocytes, but never in the protoplasm of the corpuscle at a distance from the nucleus. They were most abundant in the mononuclear leucocytes, but were present also in smaller numbers in the polymorphonuclear and eosinophilic leucocytes. Neusser expressed the view that these granules were the result of an over-production on the part of the cell-nuclei, and thought them to be related in composition to the nucleo-albumins. He considered the presence of these granules in the leucocytes as an indication of increased uric-acid production in the organism. He stated also that in certain cases of pulmonary tuberculosis the granules were markedly increased in number. Such cases, he supposed, ran a more favorable course than others, and the finding of an abundance of granules he asserted sufficed for the making of a favorable prognosis at the bedside.

A new theory to explain the causation of the uric-acid diathesis has been advanced by Kolisch, an assistant of Neusser's. He holds that the diathesis does not depend upon the formation of uric acid or upon its relative solubility, but rather upon an increased production of the so-called alloxur-bodies (including uric acid and the xanthin bases), which are derivatives from the products of broken-down nuclein. According to Kolisch, in cases of uratic diathesis the xanthin bases, which normally constitute only a very small percentage of the alloxur-bodies, are markedly increased at the expense of the uric acid, and he believes that the disease and the symptoms which accompany it are directly dependent upon the toxic effects of these xanthin bases circulating in the blood. It is to be noted, however, that while it is Kolisch's view that the xanthin bases are increased at the expense of the uric acid, he finds also that there is an absolute increase in the total amount of alloxur-bodies, so that this exceeds the limit supposed to be normal. It is of especial interest that he asserts to have made out the regular coincidence between an abundance of Neuser's granules in the leucocytes and an increase in the alloxur-bodies eliminated in the urine. Kolisch went further, and concluded that the former stood to the latter in the relation of cause and effect.

Futcher (*Centralbl. f. innere Med.*, 1896, No. 39), of the Johns Hopkins Hopital, has recently undertaken a research bearing upon this topic, and has embodied his results in an interesting paper. With the object in view of ascertaining whether or not the theory of Kolisch has any foundation, Futcher studied the blood from a large number of cases with especial reference to the presence of these granules in different metabolic conditions. Among his cases were four of true gout in which characteristic tophi and joint-affections existed. In two of these cases the granules were abundant, though not especially marked in the mononuclear leucocytes. In the other two cases the granules were present in only moderate numbers, and were not more numerous in the mononuclear than in the polymorphonuclear cells. He found further in cases of tuberculosis that in some instances the granules were abundant, in others very few in numbers, but he could make out no relation at all between the number of granules and the course of the disease. According to Futcher, many healthy individuals show the granules in just as great numbers as persons suffering from disease.

The clinical importance of Neusser's granules would seem to be further diminished by the fact that the blood shows definite daily variations as regards its richness in these granules.

In eight cases the relation of the granules to metabolism was exactly studied by Futcher by accurate chemical methods in Kraus's laboratory in